

FILE NOTATIONS

Entered in NID File ✓
Location Map Pinned ✓
Card Indexed ✓

Checked by Chief *PWB*
Approval Letter *3/8/82 J. H. H.*
Disapproval Letter

COMPLETION DATA:

Date Well Completed *5.2.7.2*

OW..... WW..... TA.....

GW...*✓*... OS..... PA.....

Location Inspected

Bond released

State or Fee Land ...

LOGS FILED

Driller's Log..... ✓

Electric Logs (No.) ✓

E..... I..... Dual I Lat..... GR-N..... Micro.....

BHC Sonic GR..... Lat..... Mi-L.....

CBLog..... CCLog..... Others.....

WELL NO. CLAY BASIN UNIT #20
API NO. 43-009-30007
SEC. 22, T. 03N, R. 24E
DAGGETT COUNTY, UTAH

NOTES FROM COVER ON OLD WELL FILE:

WELL NOT TO BE DRILLED.

4-4-72 - REFILED APPLICATION TO DRILL.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

210' FNL, 900' FWL NE NW NW

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

28 miles east of Manila, Utah

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

210'

16. NO. OF ACRES IN LEASE

640

17. NO. OF ACRES ASSIGNED
TO THIS WELL

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1500'

Unit No. 11

19. PROPOSED DEPTH

5850'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 6656'

22. APPROX. DATE WORK WILL START*

March 17, 1972

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
13-3/4	9-5/8	32.3	325'	300 sacks
7-7/8	4-1/2	11.6	To be determined	

We would like permission to drill the subject well to an estimated depth of 5850', anticipated formation tops are as follows: Mancos at the surface, Frontier at 5300', Mowry at 5500', Dakota at 5700' and Morrison at 5825'.

Mud will be adequate to contain formation fluids and blow out preventers will be checked daily.

The location requested does not comply with the State of Utah well location regulation. We request an exception as provided under Rule C-3 of the General Rules and Regulations covering well location based on topographical conditions.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

B. H. Croft

TITLE

Vice President,
Gas Supply Operations

DATE

March 7, 1972

(This space for Federal or State office use)

PERMIT NO.

43-009-30007

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

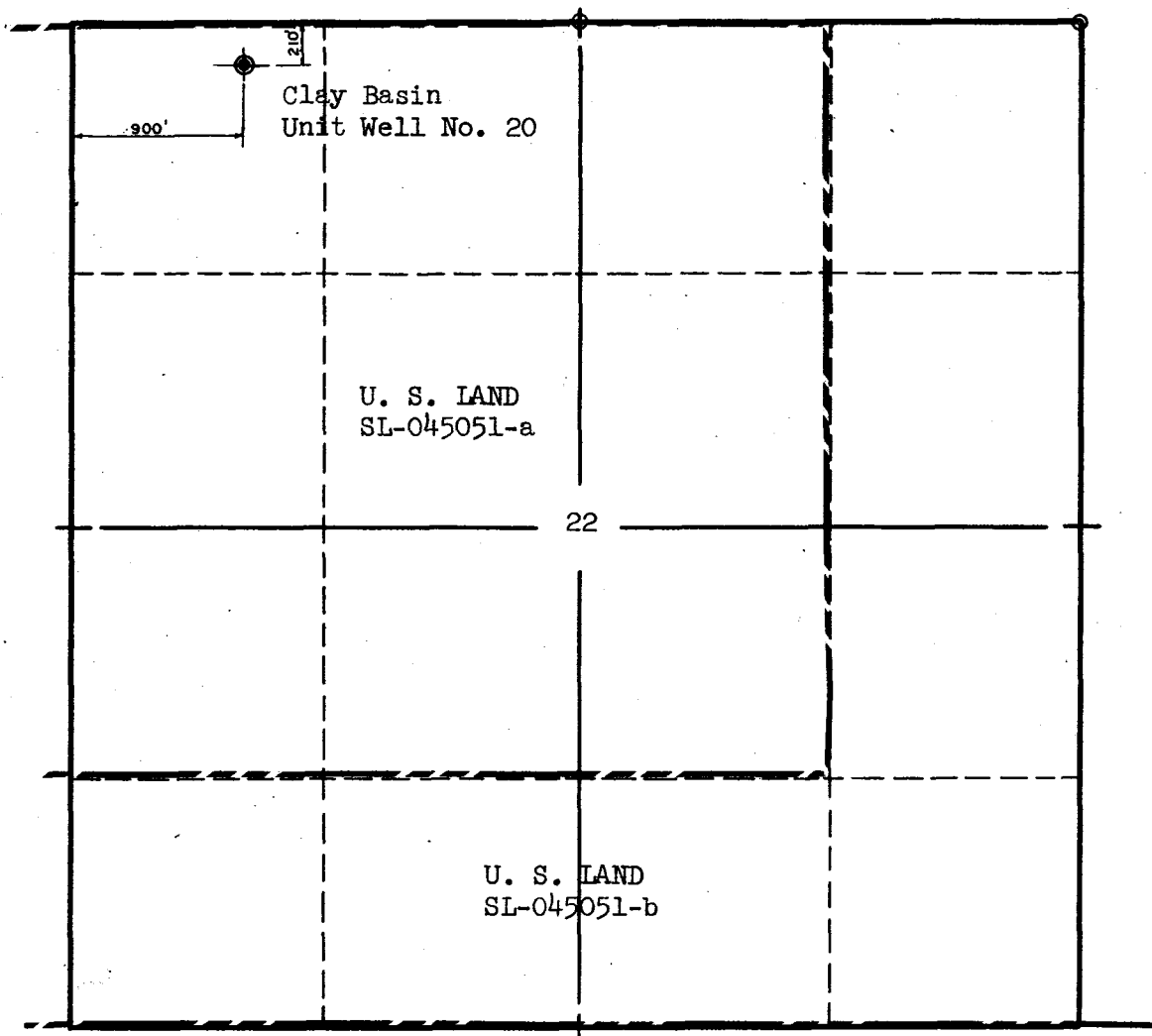
DATE

3/8/72

BY


C. B. Fugate

*See Instructions On Reverse Side



- ⊕ = Well
 ⊕ = Stone Corner
 ⊕ = Pipe Corner


This is to certify that the above plat was prepared from field notes of actual surveys made under my supervision and that the same are true and correct to the best of my knowledge.



 Engineer
 Utah Registration No. 2708

Elevation by spirit levels.
 MFSCo. bench mark - telephone pole 4063.

ENGINEERING RECORD		
W.O.	20633	
Surveyed by	J.B. Carricaburu	1/27/72
Weather		
References	G.L.O. Plat	
LOCATION DATA		
Field	Clay Basin	
Location	NW NW Sec. 22, T. 3N., R. 24E., S. 1.M.	
County	Daggett	
State	Utah	
Well Elev.	6656' (as graded)	

 MOUNTAIN FUEL SUPPLY COMPANY ROCK SPRINGS, WYOMING	
WELL LOCATION	
Clay Basin Unit Well No. 20	
DRAWN: 2/7/72 DGH	SCALE: 1 inch = 1000 feet
CHECKED: <i>Rum</i>	DRWG. NO. M-10494
APPROVED: <i>KAL</i>	

SCHEMATIC NOT
DRAWN TO SCALE

PRESENT STATUS DRAWING

DRAWN 4-28-72 BY FJC

DRILLED BY ROTARY
APRIL, 1972

CLAY BASIN UNIT WELL No. 20

CLAY BASIN FIELD

KELLY BUSHING 6668 FT.

10.19'

TUBING SPOOL

SURFACE ELEVATION 6656 FT.

SURFACE CASING

NET GROSS

1- 10" 3000 PSI NATIONAL FLANGE	1.58	1.58
10 Jts. 7 7/8" O.D., 32.3 #, H-40, 8rd thd, ST+C CASING	300.81	303.61
1- BAKER GUIDE SHOE	1.22	1.22
TOTAL	303.61	306.41

ABOVE CASING LANDED AT 315.51 FT. KBM
OR 11.90 FT. KB. WELDED ALL COLLARS AND GUIDE
SHOE. CEMENTED WITH 223 SACKS REGULAR
CEMENT TREATED WITH 1518 POUNDS D43A.
RETURNED 115 SACKS CEMENT TO SURFACE

PRODUCTION CASING

NET GROSS

1 Pc. 4 1/2" O.D., 11.60 #, N-80, 8RD THD, LT+C CASING	19.00	19.25
174 JTS. 4 1/2" O.D., 11.60 #, N-80, 8RD THD, LT+C CASING	5605.76	5649.26
1- BAKER TYPE "G" FLOAT COLLAR	1.70	1.95
1 Jt. 4 1/2" O.D., 11.60 #, N-80, 8RD THD, LT+C CASING	28.89	29.14
1- BAKER GUIDE SHOE	.75	.75
TOTALS	5656.10	5700.35

ABOVE CASING LANDED AT 5668.00 FT. KBM OR
11.90 FT. BELOW KB IN A NSC. 10-INCH 3000 PSI
CASING FLANGE ON SING. CEMENTED WITH 400
SACKS 50-50 PORTLAND CEMENT TREATED WITH
270 GEL. INSTALLED A NSC. 10-INCH 3000 PSI
BY 6 INCH 5000 PSI TUBING SPOOL.

7 7/8" O.D. 32.3 #, H-40, 8rd thd, ST+C
CASING LANDED AT 315.51' KBM.

CEMENT TOP BEHIND 4 1/2" O.D. CASING IS
AT 4124' KBM.

PBD 5628 FT. KBM

4 1/2" O.D., 11.60 #, N-80, 8RD THD, LT+C CASING
LANDED AT 5668.00 FT. KBM

TD 5669 FT. KBM

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR		Clay Basin Unit
3. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME
P. O. Box 1129, Rock Springs, Wyoming 82901		Unit Well
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		9. WELL NO.
210' FNL, 900' FWL NW NW		20
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT
43-009-30007		Clay Basin
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
GR 6656'		NW NW 22-3N-24E., SLM
		12. COUNTY OR PARISH
		Daggett
		13. STATE
		Utah

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Abandon location

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

We do not plan to drill in this section at this time and would like to abandon the location.

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 3-23-72

BY C.B. Feighan

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft

TITLE

Vice President,

Gas Supply Operations

DATE March 20, 1972

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES -
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SL - 045051-a	
b. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
2. NAME OF OPERATOR Mountain Fuel Supply Company		7. UNIT AGREEMENT NAME Clay Basin Unit	
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 829011		8. FARM OR LEASE NAME Unit Well	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) At surface 210' FNL, 900' FWL NW NW At proposed prod. zone NE NW NW		9. WELL NO. 20	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 28 miles east of Manila, Utah		10. FIELD AND POOL, OR WILDCAT Clay Basin	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 210'		11. SEC., T., R. M., OR BLK. AND SURVEY OR AREA NW NW 22-3N-24E., S.L.M.	
16. NO. OF ACRES IN LEASE 640		12. COUNTY OR PARISH Daggett	
17. NO. OF ACRES ASSIGNED TO THIS WELL -		13. STATE Utah	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 1500' Unit No. 11		19. PROPOSED DEPTH 5850'	
20. ROTARY OR CABLE TOOLS Rotary		21. APPROX. DATE WORK WILL START* April 12, 1972	
22. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 6656'		23. PROPOSED CASING AND CEMENTING PROGRAM	

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
13-3/4	9-5/8	32.3	325'	300 sacks
7-7/8	4-1/2	11.6	To be determined	

We would like permission to drill the subject well to an estimated depth of 5850'; anticipated formation tops are as follows: Mancos at the surface, Frontier at 5300', Mowry at 5500', Dakota at 5700' and Morrison at 5825'.

Mud will be adequate to contain formation fluids and blow out preventers will be checked daily.

The location requested does not comply with the State of Utah well location regulation. We request an exception as provided under Rule C-3 of the General Rules and Regulations covering well location based on topographical conditions.

Plats were sent on original application dated 3-7-72.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED B. H. Croft Jr. TITLE Vice President, Gas Supply Operations DATE April 3, 1972

(This space for Federal or State office use)

PERMIT NO. 43-009-30007 APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL AS SET
APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 4-4-72

BY Allen B. Feight

*See Instructions On Reverse Side

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

APR 1972, 19Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANYSALT LAKE CITY, UTAH 84111Signed E. MurphyPhone 328-8315Agent's title CHIEF ACCOUNTANT

SLC 045051-A

State Lease No. Federal Lease No. Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls.	Water Bbls.	Gas MCF's	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
NW NW 22	3N	24E	20 ✓		*	0	0	**	0
									Spud April 13, 1972
									T.D. 5669'
									P.B.D. 5628'
									Preparing to test.

* Not Corrected for Temperature and Gravity or BS & W
** Flared to AtmosphereNote: There were No runs or sales of oil; No M cu. ft. of
gas sold; No runs or sales of gasoline during the month.NOTE: Report on this form as provided
for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW NW 22-3N-24E., S.L.M.

12. COUNTY OR PARISH

Daggett

13. STATE

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

210' FNL, 900' FWL NW NW

14. PERMIT NO.

43-009-30007

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

GR 6656'

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Depth 1762', drilling.

Spudded April 13, 1972, ran surface casing.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. W. Croft

TITLE

Vice President,

Gas Supply Operations

DATE

April 17, 1972

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES -
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL - 045051-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW NW 22-3N-24E., S.L.M.

12. COUNTY OR PARISH 13. STATE

Daggett

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT--" for such proposals.)1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

210' FNL, 900' FWL NW NW

14. PERMIT NO.

43-009-30007

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 6667.90' GR 6656'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.)*

Depth 5520', drilling.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Croft

TITLE

Vice President,
Gas Supply Operations

DATE

April 24, 1972

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SL 045051-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Clay Basin Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

20

10. FIELD AND POOL, OR WILDCAT

Clay Basin

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW NW 22-3N-24E., S.L.M.

12. COUNTY OR PARISH 13. STATE

Daggett

Utah

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Mountain JFuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

210' FNL, 900' FWL NW NW

14. PERMIT NO.

43-009-30007

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 6667.90' GR 6656'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Supplementary history

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

TD 5669', PBD 5628', testing.

DST #1: 5475-5570', Frontier, IO $\frac{1}{2}$ hour, ISI $1\frac{1}{2}$ hours, FO 2 hours, FSI 5 hours, opened strong, $\frac{1}{2}$ hour 27 Mcf, reopened, $\frac{1}{2}$ hour 71 Mcf, 1 hour 137 Mcf, 2 hours 150 Mcf, recovered 180' gas cut mud. IHP 2717, IOFP's 37-56, ISIP 2059, FOFP's 56-93, FSIP 2218, FHP 2689.

Landed 303.61' net, 306.41' gross of 9-5/8"OD, 32.3#, H-40, ST&C casing at 315.51' KBM and cemented with 223 sacks of cement.

Ran $4\frac{1}{2}$ " production casing, perforated from 5472' to 5482' and from 5540' to 5564' with 2 holes per foot, landed 2-3/8"OD tubing at 5438.33' KBM, applied sand oil fracturing treatment using 30,000 gallons treated drip oil and 1/2 to 1 ppg 20-40 mesh sand, now testing.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Croft Jr.

TITLE

Vice President,
Gas Supply Operations

DATE

May 2, 1972

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

W

INTEROFFICE COMMUNICATION

MD

R. G. MYERS

FROM R. G. Myers

Rock Springs, Wyoming

CITY

STATE

To B. W. Croft


DATE April 28, 1972

SUBJECT Tentative Plan to Complete
Unit Well No. 20
Clay Basin Field

Attached for your information and files is a tentative plan to complete the above-captioned well.

RGM/gm

Attachment

cc: J. T. Simon
L. A. Hale (6)
J. E. Adney
Geology (2)
D. E. Dallas (4)
C. F. Rosene
E. J. Widic
U.S.G.S.
State 
A. A. Penttila
P. E. Files (4)

From: T. M. Colson

Rock Springs, Wyoming

To: R. G. Myers

April 28, 1972

Tentative Plan to Complete
Unit Well No. 20
Clay Basin Field

Present status of well is as follows:

- a. 9-5/8-inch O.D., 32.30-pound, H-40, 8 round thread, ST&C casing landed at 315.51 feet KBM.
- b. 4-1/2-inch O.D., 11.6-pound, N-80, 8 round thread, LT&C casing landed at 5668 feet KBM.
- c. The cement behind the 4-1/2-inch O.D. casing was in place at 2:45 P.M., April 27, 1972. Cement top behind the 4-1/2-inch casing is 4400 feet.
- d. A 10-inch 3000 psi by 6-inch 5000 psi pressure crossover tubing spool was installed and the seals pressure tested to 2000 psi for 5 minutes. This leaves a 6-inch 5000 psi flange looking up.

One producing zone was indicated by open hole drill stem tests.

Drill Stem Test No. 1

Depth 5570 feet, packers 5469 feet and 5475 feet

Frontier 1st and 2nd, 5474 feet to 5484 feet,

5502 feet to 5511 feet, and 5526 feet to 5569 feet,

47 unit gas increase

IO 1/2 hour, ISI 1-1/2 hours, FO 2 hours, FSI 5 hours, opened strong, gas in 8 minutes, 1/4 hour 13 MCF, 1/2 hour 27 MCF; reopened, 1/4 hour 61 MCF, 1/2 hour 71 MCF, 3/4 hour 78 MCF, 1 hour 137 MCF, 1-1/4 hours 129 MCF, 1-1/2 hours 132 MCF, 1-3/4 hours 140 MCF, 2 hours 150 MCF. Recovered 180 feet gas cut mud (8.9 ppg, Res. 3.2), pit mud 9.5 ppg, Res. 2.8.

IHP 2717, IOFP's 37-56, ISIP 2059, FOFP's 56-93, FSIP 2218, FHP 2689. BHT 122°F.

A tentative plan to complete the well follows:

NOTE: KB is 10.19 feet above the 6-inch 5000 psi tubing spool.

1. Rig up Dresser Atlas lubricator and run a cement bond PFC log from plug back depth to the top of the cement behind the 4-1/2-inch casing.
2. Install a 6-inch 5000 psi double gate hydraulically operated blowout preventer with 2-3/8-inch rams in top and blind rams in bottom.
3. After a WOC time of at least 56 hours, run a 3-3/4-inch bit on 2-3/8-inch O.D., 4.6-pound, J-55 seal lock tubing to check plugged back depth.

4. Using Halliburton pump truck, pressure test casing and tubing rams to 5000 psi for 15 minutes. The minimum internal yield for new 4-1/2-inch O.D., 11.6-pound, N-80 casing is 7780 psi and the wellhead has a working pressure of 5000 psi with a test pressure of 10,000 psi. Land tubing on the NSCo. Type H-1 tubing hanger and pressure test casing and blind rams to 5000 psi for 15 minutes.
5. Displace the water out of the casing from plugged back depth to surface with drip oil treated with 0.05-pound Adomite and 0.005 gallon FR-5 per gallon drip oil. Approximately 84 barrels will be required. Pull 2-3/8-inch O.D. tubing and stand in derrick.
6. Rig up Dresser Atlas lubricator and perforate with two Golden Jet holes per foot as follows:

5472 feet to 5482 feet KBM
5540 feet to 5564 feet KBM

In all a total of 32 feet will be perforated with 64 holes. The above perforating depths are from the Dresser Atlas density log dated April 26, 1972. Record any surface pressure.

7. Install a 6-inch 3000 psi stripper head with a 2-3/8-inch rubber. Run and land 2-3/8-inch O.D. tubing at a maximum depth of 5440 feet KBM as follows:

(Top of String in Well)

1 NSCo. H-1 tubing hanger tapped for 2-3/8-inch O.D., 8 round thread, EUE tubing.

1 Baker 2-3/8-inch blast joint (2-3/8-inch 8 round thread EUE double pin) approximately three feet long.

1 2-3/8-inch 8 round thread EUE collar.

1 2-3/8-inch 8 round thread EUE by 2-3/8-inch seal lock change nipple.

Approximately 5430 feet 2-3/8-inch O.D., 4.6-pound, J-55 seal lock tubing.

1 Shop made 2-3/8-inch seal lock combination closing tool-tubing shoe with aluminum plug.

8. Remove blowout preventer and stripper head. Install upper portion of wellhead.
9. Rig up three HT-400 pump trucks and one pressurized blender in order to apply sand-oil treatment to above casing perforations down 2-3/8-inch O.D. tubing and 2-3/8-inch O.D. tubing by 4-1/2-inch O.D. casing annulus simultaneously. Install a frac-ball injector in the discharge line going to the tubing and a pressure recorder on one of the discharge lines going to the casing. A fracometer will be used during the sand-oil treatment. A Halliburton fire truck and mechanic will be on location. The annulus between the 9-5/8-inch O.D. casing and the 4-1/2-inch O.D. casing should be open and observed during the fracturing operations.
10. Pressure test surface lines from pump trucks to wellhead to 7000 psi. Fill the 2-3/8-inch O.D. tubing and pump out plug with drip oil treated with 0.05-pound Adomite and 0.005 gallon FR-5 per gallon drip oil. 20 barrels will be required. Using all three pump trucks, pump 60 barrels (2520 gallons) drip oil treated as above in order to obtain breakdown pressure and injection rate. During this time, observe surface lines, connections and wellhead for leaks. If breakdown pressure is 5500 psi or less, proceed with the sand-oil treatment.
11. Apply the sand-oil treatment in the following manner: All drip oil will be treated with 0.05-pound Adomite and 0.005 gallon FR-5 per gallon except that used during the flush, and all sand will be 20-40 mesh Ottawa. Do not exceed a maximum surface pump pressure of 6500 psig.
 - A. Pump 5000 gallons drip oil mixed with 1/2 ppg sand.
Pump 5000 gallons drip oil mixed with 3/4 ppg sand.
Pump 5000 gallons drip oil mixed with 1 ppg sand.
 - B. Inject 30 7/8-inch O.D. rubber coated nylon ball sealers.

12. Repeat Item No. 12, Part A only. Displace the drip oil-sand-Adomite-FR-5 mixture with 100 barrels drip oil treated with 0.005 gallon FR-5 per gallon drip oil. This represents the capacity of the casing and tubing to the top of the perforations at 5182 feet KBM plus 18 barrels in order to allow for pumps and discharge lines.
14. Rig up Halliburton wireline equipment and run 7/8-inch weight section to determine sand fillup in the 4-1/2-inch O.D. casing. Leave well shut in 8 hours.
15. Run short production test through separator. Release rig.

GENERAL INFORMATION

- I. The following material will be used during the sand-oil treatment.
 - a. Drip oil
 - 84 barrels - load hole
 - 20 barrels - fill tubing
 - 60 barrels - breakdown
 - 714 barrels - treating fluid
 - 100 barrels - displacement
 - 222 barrels - contingencies
 - 1200 barrels - total
- II. Three 400 barrel tanks will be used for drip oil storage.
- III. All ram type preventers will have hand wheels installed and operative at the time the preventers are installed.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____				
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____		
2. NAME OF OPERATOR Mountain Fuel Supply Company									
3. ADDRESS OF OPERATOR P. O. Box 1129, Rock Springs, Wyoming 82901									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 210' FNL, 900' FWL NW NW At top prod. interval reported below At total depth									
14. PERMIT NO. 43-009-30007				DATE ISSUED					
15. DATE SPUDDED 4-13-72		16. DATE T.D. REACHED 4-26-72		17. DATE COMPL. (Ready to prod.) 5-2-72		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* KB 6667.90' GR 6656'		19. ELEV. CASINGHEAD -	
20. TOTAL DEPTH, MD & TVD 5669		21. PLUG, BACK T.D., MD & TVD 5628		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY → 10-5669		ROTARY TOOLS -	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5472-5482' and 5540-5564' - Frontier								25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction Focused, Density								27. WAS WELL CORED No	
33.* PRODUCTION									
DATE FIRST PRODUCTION Shut in		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing						WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 5/1-2/72	HOURS TESTED 9½	CHOKE SIZE 5/8"	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO		
FLOW. TUBING PRESS. 760	CASING PRESSURE 1050	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—MCF. 4300 ✓	WATER—BBL. 0	OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented while testing.							TEST WITNESSED BY		
35. LIST OF ATTACHMENTS Logs as above, Well Completion to be sent at a later date.									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records									
SIGNED <u>B. H. Croft Jr.</u>				TITLE <u>Vice President,</u> <u>Gas Supply Operations</u>		DATE <u>May 3, 1972</u>			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s) and bottom(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		TOP	
				NAME	MEAS. DEPTH	MEAS. DEPTH	TRUE VERT. DEPTH
				Log tops:			
				Mancos	0'		
				Frontier	5451'		
				Mowry	5650'		

MAY 5 1972

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

MAY 1972, 19Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANYSALT LAKE CITY, UTAH 84111 Signed J. MurphyPhone 328-8315 Agent's title CHIEF ACCOUNTANTState Lease No. Federal Lease No. SIC 045051B Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls.	Water Bbls.	Gas MCF's	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
NW NW 23	3N	24E	18	SI	0	0	0	0	Spud February 21, 1972 T.D. 6300' Shut In Waiting on Completion tools

* Not Corrected for Temperature and Gravity or BS & W
** Flared to AtmosphereNote: There were No runs or sales of oil; No M cu. ft. of
gas sold; No runs or sales of gasoline during the month.NOTE: Report on this form as provided
for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

JUN 1972, 19Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANYSALT LAKE CITY, UTAH 84111 Signed E. MurphyPhone 328-8315 Agent's title CHIEF ACCOUNTANTState Lease No. SLC 045051-A Federal Lease No. Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls.	Water Bbls.	Gas MCF's	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
NW NW 22	3N	24E	20	SI	0	0	0	0	✓ Spud, April 13, 1972 T.D. 5,669' P.B.D. 5,628' ✓ Test: Well flowed 4,300 MCF/D ✓ Shut in

* Not Corrected for Temperature and Gravity or BS & W
** Flared to AtmosphereNote: There were NO runs or sales of oil; NO M cu. ft. of
gas sold; NO runs or sales of gasoline during the month.NOTE: Report on this form as provided
for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for

JUL 1972, 19Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANYSALT LAKE CITY, UTAH 84111 Signed E. MurphyPhone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC 045051-A

State Lease No. Federal Lease No. Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls.	Water Bbls.	Gas MCF's	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
NW NW 22	3N	24E	20	SI	0	0	0	0	Spud April 13, 1972 T D 5,669' PBD 5,628' Shut In

* Not Corrected for Temperature and Gravity or BS & W
** Flared to Atmosphere

Note: There were No runs or sales of oil; No M cu. ft. of
gas sold; No runs or sales of gasoline during the month.

NOTE: Report on this form as provided
for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Daggett Field or Lease Clay Basin

The following is a correct report of operations and production (including drilling and producing wells) for
AUG 1972, 19.....

Agent's address P. O. BOX 11368 Company MOUNTAIN FUEL SUPPLY COMPANY

SALT LAKE CITY, UTAH 84111 Signed E. Murphy

Phone 328-8315 Agent's title CHIEF ACCOUNTANT

SLC 045051-A

State Lease No. Federal Lease No. Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls. *	Water Bbls.	Gas MCF's **	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
NW NW 22	3N	24E	20	SI	0	0	0	0	Spud April 13, 1972 T D 5,669' PBD 5,628' Initial Production August 21, 1972 Final Report See Other Report

* Not Corrected for Temperature and Gravity or BS & W
** Flared to Atmosphere

Note: There were _____ runs or sales of oil; _____ M cu. ft. of
gas sold; _____ runs or sales of gasoline during the month.

NOTE: Report on this form as provided
for in Rule C-22. (See back of form.)

FILE IN DUPLICATE

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead
GI-Gas Injection TA-Temp. Aban.
WI-Water Injection

3N 24E 22

LOCATION: CLAY BASIN M.S. # 7		COUNTY DAGGETT		STATE UTAH		DATE 10-19-82																																	
STATION OR CUSTOMER CLAY BASIN # 20				TIME OF TEST		AM 3:30 PM																																	
ORIFICE METER	MAKE Foxboro	SERIAL NO. 315458	TYPE 28	CHART NO. 89N074L	STATIC CON. D.S.	PEN ARC OK	CLOCK ROT. 31 DAY																																
METER RANGE	INCHES 100	POUNDS 1000	ATMOS. PRESS. 11.6	IS ATMOS SET ON CHART? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		TYPE OF CHART USED <input checked="" type="checkbox"/> Sq. Root <input type="checkbox"/> Linear																																	
METER READING	DEAD WEIGHT CHECK		STATIC FOUND	STATIC LEFT	Diff. Found	Diff. Left	Temp. Found	Temp. Left	Time Lag																														
	D. W. Press. 424		6.60	6.60	0	0	49°	49°	6 hrs																														
	Atmos. Press. 11.6																																						
Static Pen Set 435.6																																							
DIFFERENTIAL TEST								STATIC TEST																															
AS FOUND				AS LEFT				AS FOUND				AS LEFT				SQ. RT. VALUE, AS LEFT																							
UP		DOWN		UP		DOWN		D. W. Meter		D. W. Meter		$\sqrt{\frac{P_{sia} \times 100}{R_p}} = \sqrt{\frac{435.6 \times 100}{1000}} = 6.60$																											
Man.	Meter	Man.	Meter	Man.	Meter	Man.	Meter																																
0	0	80	80	0		80																																	
10	10	60	60	10		60																																	
30	30	40	40	30	SAME	40																																	
50	50	20	20	50		20		THERMOMETER																															
70	70	0	0	70		0		MAKE - Foxboro																															
90	90			90				RANGE -30° TO +120°F				SERIAL NO. 299287																											
AS FOUND				AS LEFT				AS FOUND				AS LEFT																											
UP		DOWN		UP		DOWN		UP		DOWN		UP		DOWN																									
Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm	Test Therm	Rec. Therm																								
ORIFICE PLATE								ORIFICE FITTING OR UNION																															
Size 3" x 1.500"								Make - DANIEL								Type - Simplex																							
Edges Sharp?				Orifice Condition				Serial No. ASA 600				Line Size 3.068				I.D.																							
				Damaged? <input type="checkbox"/> Dirty? <input type="checkbox"/>																																			
Micro Horizontal				Micro Vertical				Meter Tube				Upstream ID				Downstream ID																							
TELEMETERING																GRAVITY:				ATMOS. TEMP																			
DIFFERENTIAL																PRESSURE								REMARKS:															
FOUND								LEFT								FOUND								LEFT															
UP				DOWN				UP				DOWN				UP				DOWN				UP				DOWN											
TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS	TEST	TRANS												
0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %													
25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %													
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75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %		75 %		25 %													
100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %		100 %		0 %													
																M.F.S. CO. TESTER: Doug Walters								WITNESS:															



MOUNTAIN FUEL SUPPLY COMPANY

180 EAST FIRST SOUTH • P. O. BOX 11368 • SALT LAKE CITY, UTAH 84139 • PHONE (801) 534-5555

April 10, 1984

Working Interest Owners
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming


Gentlemen:

Mountain Fuel Supply Company, as designated operator of the Clay Basin Unit, hereby resigns as Unit Operator under the provisions of Section 4 of the Unit Agreement subject to: WEXPRO Company being designated successor Unit Operator by the committed working interest owners and approval by the Bureau of Land Management.

WEXPRO Company, a wholly owned second tier subsidiary company of Mountain Fuel Supply Company, has assumed all of the development and producing operations of Mountain Fuel. Office and operating personnel have been transferred to WEXPRO so there will be no physical change in operations.

MOUNTAIN FUEL SUPPLY COMPANY

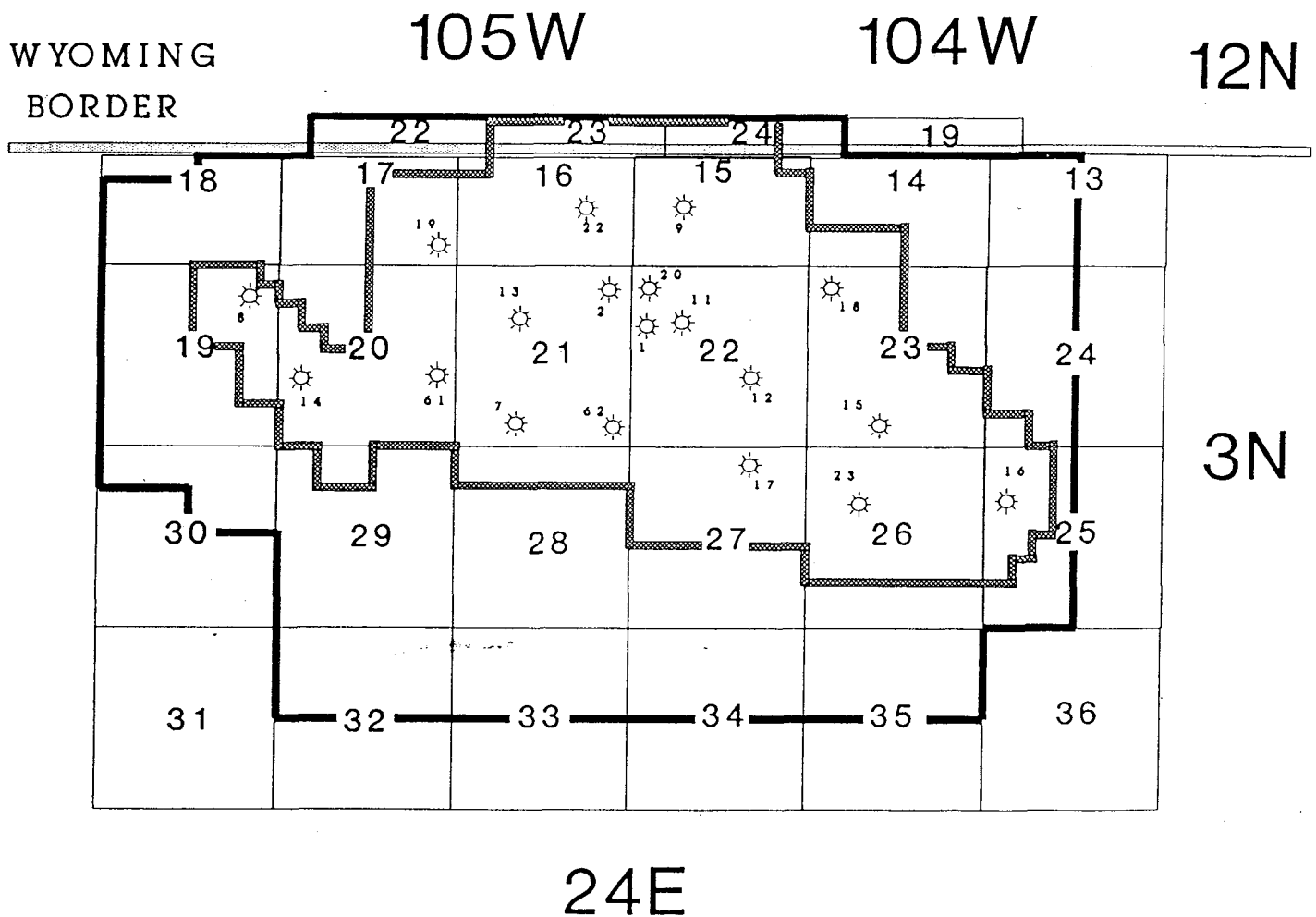
BY:


W. F. Edwards
Vice President

cc: Mr. E. W. Gynn
Chief, Branch of Fluid Minerals
Bureau of Land Management
136 East South Temple
University Club Building, 11th Floor
Salt Lake City, UT 84111

CLAY BASIN UNIT

Daggett County, Utah



— UNIT OUTLINE (UTU63009X)

— FRONTIER PA

11,162.43 ACRES

FRONTIER PA ALLOCATION	
FEDERAL	82.17194%
STATE	9.63096%
FEE	8.19710%
4,765.64 Acres	



United States Department of the Interior

IN REPLY REFER TO

BUREAU OF LAND MANAGEMENT
UTAH STATE OFFICE
136 E. SOUTH TEMPLE
SALT LAKE CITY, UTAH 84111

April 26, 1984

WEXPRO Company
P.O. Box 11368
Salt Lake City, Utah 84139

Re: Successor Unit Operator
Clay Basin Unit
Daggett County, Utah and
Sweetwater County, Wyoming

Gentlemen:

On April 26, 1984, we received an indenture dated April 10, 1984, whereby Mountain Fuel Supply Company resigned as Unit Operator and WEXPRO Company is accepted as Successor of Unit Operator for the Clay Basin Unit Agreement, Daggett County, Utah and Sweetwater County, Wyoming.

The indenture was executed by both parties. The signatory parties have complied with Section 6 of the unit agreement. The instrument is hereby accepted effective as of April 26, 1984. Please advise all interested parties of the change in unit operator.

Sincerely,

E. W. Guynn
Chief, Branch of Fluid Minerals

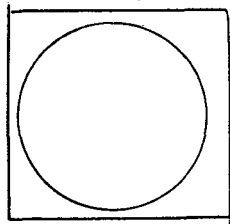
Enclosure

RECEIVED
APR 30 1984

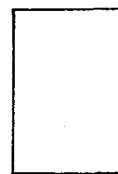
WEXPRO COMPANY
LANDS & LEASING



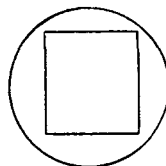
tank w/ firewall



emergency pit



dehydrator w/
shed.



well head.



access
road



STATE OF UTAH
DIVISION OF OIL, GAS AND MINING
1594 West North Temple, Suite 1210, PO Box 145801, Salt Lake City, UT 84114-5801

Page 2 of 5

MONTHLY OIL AND GAS PRODUCTION REPORT

OPERATOR NAME AND ADDRESS:

JOHN JOOSTEN
WEXPRO COMPANY
PO BOX 11070
SALT LAKE CITY UT 84147

UTAH ACCOUNT NUMBER: N1070REPORT PERIOD (MONTH/YEAR): 9 / 96AMENDED REPORT ☐ (Highlight Changes)

Well Name			Producing Zone	Well Status	Days Oper	Production Volumes		
API Number	Entity	Location				OIL(BBL)	GAS(MCF)	WATER(BBL)
✓ CLAY BASIN UNIT 14								
4300915638	01025	03N 24E 20	FRTR					
✓ CLAY BASIN UNIT 15								
4300915639	01025	03N 24E 23	FRTR					
✓ CLAY BASIN UNIT #16								
4300930003	01025	03N 24E 25	FRTR					
✓ CLAY BASIN UNIT #17								
4300930004	01025	03N 24E 27	FRTR					
✓ CLAY BASIN UNIT #18								
4300930006	01025	03N 24E 23	FRTR					
✓ CLAY BASIN UNIT #20								
4300930007	01025	03N 24E 22	FRTR					
✓ CLAY BASIN UNIT #19								
4300930008	01025	03N 24E 17	FRTR					
✓ CLAY BASIN UNIT #23								
4300930009	01025	03N 24E 26	FRTR					
✓ CLAY BASIN UNIT #22								
4300930010	01025	03N 24E 16	FRTR			ML-807		
✓ CLAY BASIN UNIT #61								
4300930060	01025	03N 24E 20	FRTR					
✓ CLAY BASIN UNIT #62								
4300930061	01025	03N 24E 21	FRTR					
CARTER-LEVERTON STATE 1								
4303710529	01031	33S 26E 32	ISMY					
PIUTE KNOLL #1								
4303730097	01032	33S 25E 26	ISMY					
TOTALS								

COMMENTS:

I hereby certify that this report is true and complete to the best of my knowledge.

Date: _____

Name and Signature: _____

Telephone Number: _____

OPERATOR CHANGE WORKSHEET

Attach all documentation received by the division regarding this change.

Initial each listed item when completed. Write N/A if item is not applicable.

Routing		
1-LEC	6-LEC	
2-GLH	7-KDR	
3-DTS	8-SJ	
4-VLD	9-FILE	
5-RJF		

☒ Change of Operator (well sold)☐ Designation of Agent☐ Designation of Operator☐ Operator Name Change OnlyThe operator of the well(s) listed below has changed, effective: 4-26-84

TO: (new operator) WEXPRO COMPANY
 (address) PO BOX 11070
SALT LAKE CITY UT 84147

Phone: (801) 530-2586Account no. N1070

FROM: (old operator) MOUNTAIN FUEL SUPPLY CO
 (address) 180 E 100 S
SALT LAKE CITY UT 84139

Phone: (801) 534-5267Account no. N0680

WELL(S) attach additional page if needed:

***CLAY BASIN UNIT**

Name: **SEE ATTACHED**	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____
Name: _____	API: _____	Entity: _____	S _____	T _____	R _____	Lease: _____

OPERATOR CHANGE DOCUMENTATION

- N/A 1. (r649-8-10) Sundry or other legal documentation has been received from the **FORMER** operator (attach to this form). ** See Comments.*
- N/A 2. (r649-8-10) Sundry or other legal documentation has been received from the **NEW** operator (Attach to this form). ** See Comments.*
- N/A 3. The Department of Commerce has been contacted if the new operator above is not currently operating any wells in Utah. Is the company registered with the state? (yes/no) ____ If yes, show company file number: _____.
- Lic 4. **FOR INDIAN AND FEDERAL WELLS ONLY.** The BLM has been contacted regarding this change. Make note of BLM status in comments section of this form. BLM approval of Federal and Indian well operator changes should ordinarily take place prior to the division's approval, and before the completion of steps 5 through 9 below.
- N/A 5. Changes have been entered in the Oil and Gas Information System (3270) for each well listed above. ** See Comments.*
- N/A 6. Cardex file has been updated for each well listed above. ** See Comments.*
- Lic 7. Well file labels have been updated for each well listed above. (11-6-96)
- N/A 8. Changes have been included on the monthly "Operator, Address, and Account Changes" memo for distribution to Trust Lands, Sovereign Lands, UGS, Tax Commission, etc. ** See Comments.*
- Lic 9. A folder has been set up for the Operator Change file, and a copy of this page has been placed there for reference during routing and processing of the original documents.

ENTITY REVIEW

- LC 1. (r649-8-7) Entity assignments have been reviewed for all wells listed above. Were entity changes made? (yes/no) no If entity assignments were changed, attach copies of Form 6, Entity Action Form.
- N/A 2. Trust Lands, Sovereign Lands, Tax Commission, etc., have been notified through normal procedures of entity changes.

BOND VERIFICATION - (FEE WELLS ONLY)

- N/A LC 1. (r649-3-1) The NEW operator of any fee lease well listed above has furnished a proper bond.
2. A copy of this form has been placed in the new and former operator's bond files.
3. The FORMER operator has requested a release of liability from their bond (yes/no) , as of today's date . If yes, division response was made to this request by letter dated .

LEASE INTEREST OWNER NOTIFICATION OF RESPONSIBILITY

- N/A 1. Copies of documents have been sent on to at Trust Lands for changes involving State leases, in order to remind that agency of their responsibility to review for proper bonding.

FILMING

- VB 1. All attachments to this form have been microfilmed. Today's date: .

FILING

1. Copies of all attachments to this form have been filed in each well file.
2. The original of this form, and the original attachments are now being filed in the Operator Change file.

COMMENTS

961106 DoGm Computer & Cardex updated 4/84.
Labels & well files being updated now; error caught by "Well Records".

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. TYPE OF WELL

OIL ☐ WELL GAS ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

WEXPRO COMPANY

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 458, ROCK SPRINGS, WY 82902 (307) 382-9791

4. LOCATION OF WELL (FOOTAGE, SEC., T., R., M., OR SURVEY DESCRIPTION)

SEE ATTACHED SHEET

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF N

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other VARIANCE

Handwritten notes:
+ CHD
2-11-02
3-21-02
Copy files
well on
back of Sundry

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Wexpro Company is requesting a variance from the requirement to install Enardo vent stack valves on the storage tanks for the wells listed on the attached sheet. This request is due to the potential freezing problems encountered with the Enardo vent stack valves. In the past storage tanks have been over pressured, as they could not vent, and once over pressured ruptured causing the top of the tank to be thrown from the tank. The potential tank damage, loss of fluids, fire and ground contamination are our primary safety and environmental concerns for this request.

Accepted by the
Utah Division
Oil, Gas and Mining

Date:

By:

Handwritten note:
List of wells
on back.

Federal Approval Of This
Action Is Necessary

RECEIVED

OCT 28 2002

DIVISION OF
OIL, GAS AND MINING

RECEIVED BY OPERATOR
10-29-02
CHD

14. I hereby certify that the foregoing is true.

Signed

Title Title G. T. Nimmo, Operations Manager

Date

October 21, 2002

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S. C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

WELL NAME	API NUMBER	LEGAL DESCRIPTION	COUNTY, STATE	UNIT CA PA NUMBER	LEASE NUMBER
<u>CLAY BASIN FIELD UNIT</u>				892000323B	
UNIT NO. 1	4300915625	SW NW 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 7	4300915631	SE SW 21-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 8	4300915632	NE NE 19-3N-24E	DAGGETT, UT		SL-062508
UNIT NO. 9	4300915633	NE SW 15-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 12	4300915636	NW SE 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 13	4300915637	SE NW 21-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 14	4300915638	NW SW 20-3N-24E	DAGGETT, UT		SL-062508
UNIT NO. 15	4300915639	SE SW 23-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 16	4300930003	SW NW 25-3N-24E	DAGGETT, UT		SL-045049
UNIT NO. 17	4300930004	NW NE 27-3N-24E	DAGGETT, UT		SL-045053-a
UNIT NO. 18	4300930006	NW NW 23-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 19	4300930008	SE SE 17-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 20	4300930007	NW NW 22-3N-24E	DAGGETT, UT		SL-045051-a
UNIT NO. 22	4300930001	NW SE 16-3N-24E	DAGGETT, UT		ML-807
UNIT NO. 23	4300930009	SE NW 26-3N-24E	DAGGETT, UT		SL-045053-b
UNIT NO. 61	4300930060	NE SE 20-3N-24E	DAGGETT, UT		SL-045051-b
UNIT NO. 62	4300930061	SE SE 21-3N-24E	DAGGETT, UT		SL-045051-b

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on page 2.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. SL-045051-a
2. Name of Operator Wexpro Company		6. If Indian, Allottee, or Tribe Name N/A
3a. Address P.O. Box 458 Rock Springs, WY 82902	3b. Phone No. (include area code) 307.382.9791	7. If Unit or CA. Agreement Name and/or No. Clay Basin Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 210' FNL 900' FWL NW NW 22-3N-24E		8. Well Name and No. Clay Basin Unit 20
		9. API Well No. 43-009-30007
		10. Field and Pool, or Exploratory Area Frontier
		11. County or Parish, State Daggett Utah

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will performed or provide the Bond No. on file with the BLM/ BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

The above well resumed production on December 15, 2007 after being off more than 90 days.

RECEIVED

DEC 20 2007

DIV. OF OIL, GAS & MINING

14. I hereby certify that the foregoing is true and correct.

Name (Printed/ Typed)

G.T. Nimmo

Title

Operations Manager

Signature

Date

December 17, 2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

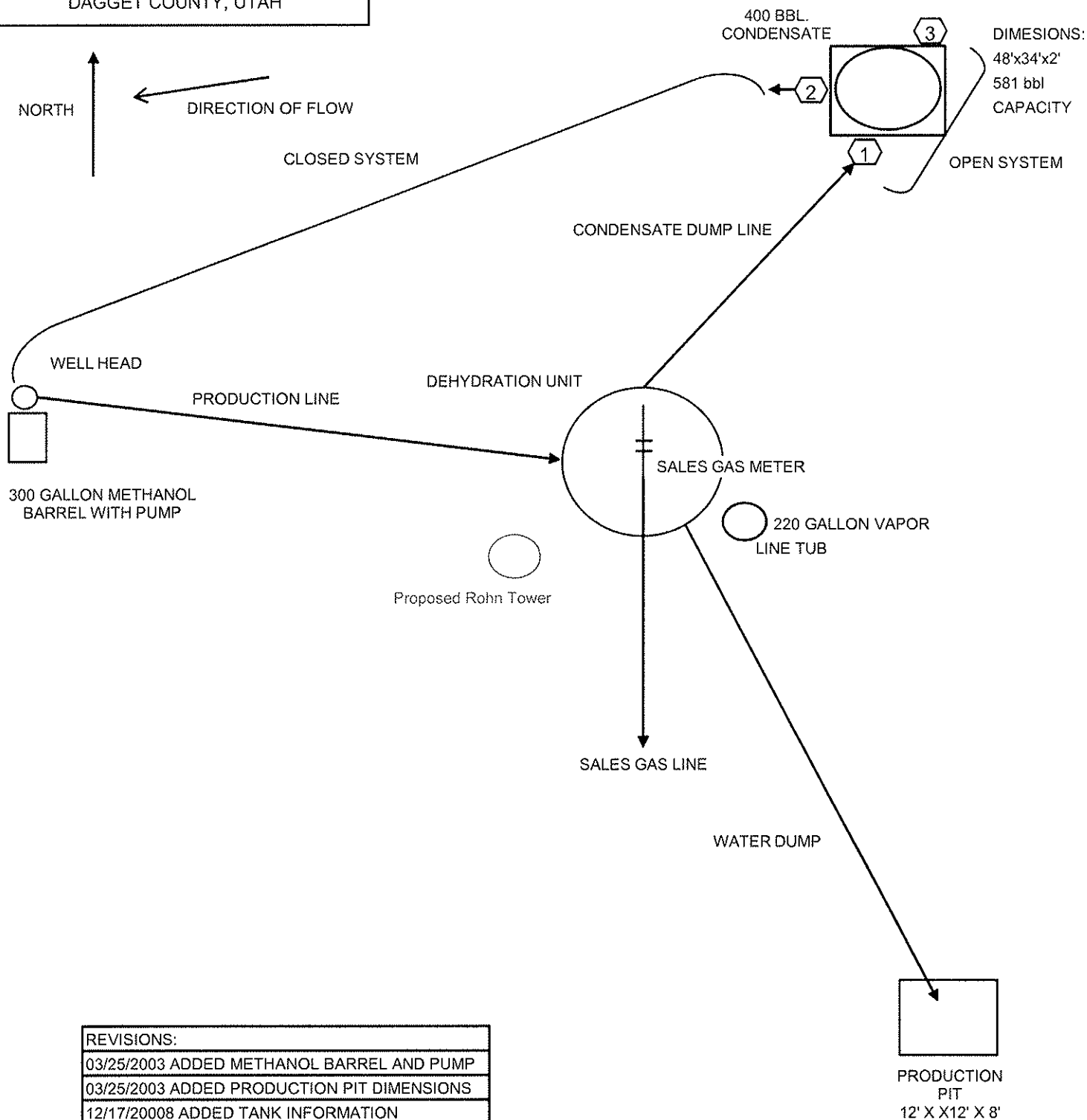
(Instructions on page 2)

API Well No: 43009300070000

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A			
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:			
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN			
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20			
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300070000			
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN			
COUNTY: DAGGETT		STATE: UTAH			
11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION <input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 11/6/2009 <input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: <input type="checkbox"/> SPUD REPORT Date of Spud: <input type="checkbox"/> DRILLING REPORT Report Date:	TYPE OF ACTION <table style="width:100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input checked="" type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER: </td> </tr> </table>		<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input checked="" type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION OTHER:
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12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc. <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>Wexpro Company and Questar Gas Management intend to upgrade the existing gas metering equipment. The upgrade will consist of the installation of towers and antennas for radio communications. The Rohn tower will be approximately 20 feet high. The cement base will be buried. The base is 2 feet in diameter and 3 feet in height. The Rohn tower will be used to mount the new flow computer and communication equipment needed to communicate volume data from the well sites to a central SCADA computer located at Red Wash. Questar Gas Management will also be replacing the existing EFM and installing a Fisher FB 107, Fisher 205P MVS and a PGI Temperature Element and any other associated equipment. Please see attached diagrams for placement of the Rohn tower and Specification sheets.</p> </div> <div style="width: 25%; text-align: right;"> <p>Approved by the Utah Division of Oil, Gas and Mining</p> <p>Date: <u>November 02, 2009</u></p> <p>By: <u><i>Derek Duff</i></u></p> </div> </div>					
NAME (PLEASE PRINT) Paul Jibson		PHONE NUMBER 307 922-5647			
SIGNATURE N/A		TITLE Associate Permit Agent			
DATE 11/2/2009					

RECEIVED November 02, 2009

WEXPRO COMPANY P.O. BOX 458 ROCK SPRINGS, WY 82902	NOTE: THIS LEASE FALLS UNDER THE SITE & SECURITY PLAN ESTABLISHED BY WEXPRO COMPANY. THE PLAN CAN BE REVIEWED AT THE WEXPRO OFFICE IN ROCK SPRINGS WYOMING WEEKDAYS BETWEEN 7:00 AM AND 5:00 PM	VALVE LEGEND TANK # 310 VALVE # 1 -- OPEN DURING PRODUCTION, SEALED CLOSED DURING SALES VALVE # 2 -- OPEN DURING SALES, SEALED CLOSED DURING PRODUCTION VALVE # 3 -- OPEN ONLY TO DRAIN WATER, SEALED CLOSED DURING PRODUCTION
CLAY BASIN UNIT WELL 20 NWNW 22-3N-24E LEASE NO. SL-045051-a UNIT NO. 892000323B DAGGET COUNTY, UTAH		



REVISIONS:
03/25/2003 ADDED METHANOL BARREL AND PUMP
03/25/2003 ADDED PRODUCTION PIT DIMENSIONS
12/17/20008 ADDED TANK INFORMATION
5/29/2009 ADDED VAPOR TUB, LRGR METH TANK

FloBoss™ 107 Flow Manager.

The FloBoss™ 107 Flow Manager introduces a new technology platform to the FloBoss family of flow computers that raises the bar for modularity, versatility, performance, and ease of use. Whether you need a single or multi-run flow computer or few or many I/O points, the new FloBoss 107 can accommodate your needs. The FloBoss 107 is the ideal measurement solution for many natural gas applications. These include, but are not limited to:

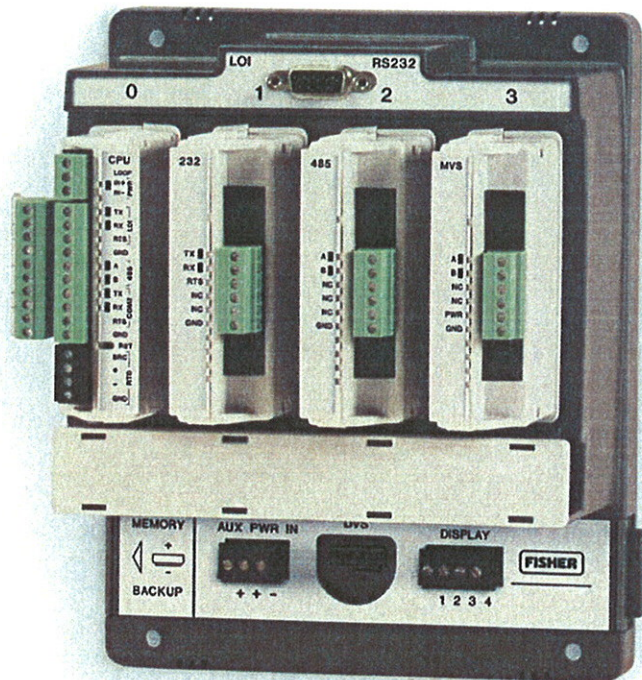
- Custody Transfer
- Wellhead Measurement and Control
- Well Injection Pressure
- Compressor Fuel Gas
- Industrial Gas Usage
- Commercial Gas Usage

The new FloBoss 107 offers you benefits that research has shown flow computer users request. You also get all of the tried and true features of previous FloBoss units such as accurate AGA calculations, data archival, broad communications support, low power consumption, PID loop control, FST control, and operation over extreme temperatures.

API/AGA/ISO Compliant Flow Measurement. The FloBoss 107 maintains API Chapter 21.1 compliant historical archives for measured and calculated values, as well as events and alarms. The firmware has the capability to perform AGA3 orifice flow calculations or AGA7 pulse flow calculations using AGA8 compressibility. It also performs ISO 5167 flow calculations. Other gas flow or properties calculations can be implemented using User C programs.

One to Four Meter Runs. The FloBoss 107 features a built-in dual-variable sensor (DVS) port and RTD input for handling a single meter run. For multiple runs, an optional multi-variable sensor (MVS) module supports up to four remote MVS units.

Scalable and Configurable I/O. You can add a configurable I/O board to the CPU module and up to three configurable I/O modules to the base FloBoss 107. For even more capacity, add an expansion rack to house up to three additional I/O modules.



FloBoss 107 Base Unit

Local or Host Operation. The FloBoss 107 is configured and operated on-site using our Windows® based ROCLINK™ 800 Configuration Software. The FloBoss 107 can also be configured and operated from a computer running popular host software packages. Modbus ASCII and RTU slave or host protocols, as well as native ROC protocol, are supported.

More Communication Choices. The FloBoss 107 comes standard with 3 ports: local operator interface, RS-232, and RS-485. One additional port is supported using an expansion communication module.

Built-in Control Capability. The FloBoss 107 can perform PID control on 8 loops using analog or discrete outputs. A wide range of control problems can be solved easily and quickly with outstanding results. It can also perform logic and sequencing control by means of Function Sequence Tables (FSTs).

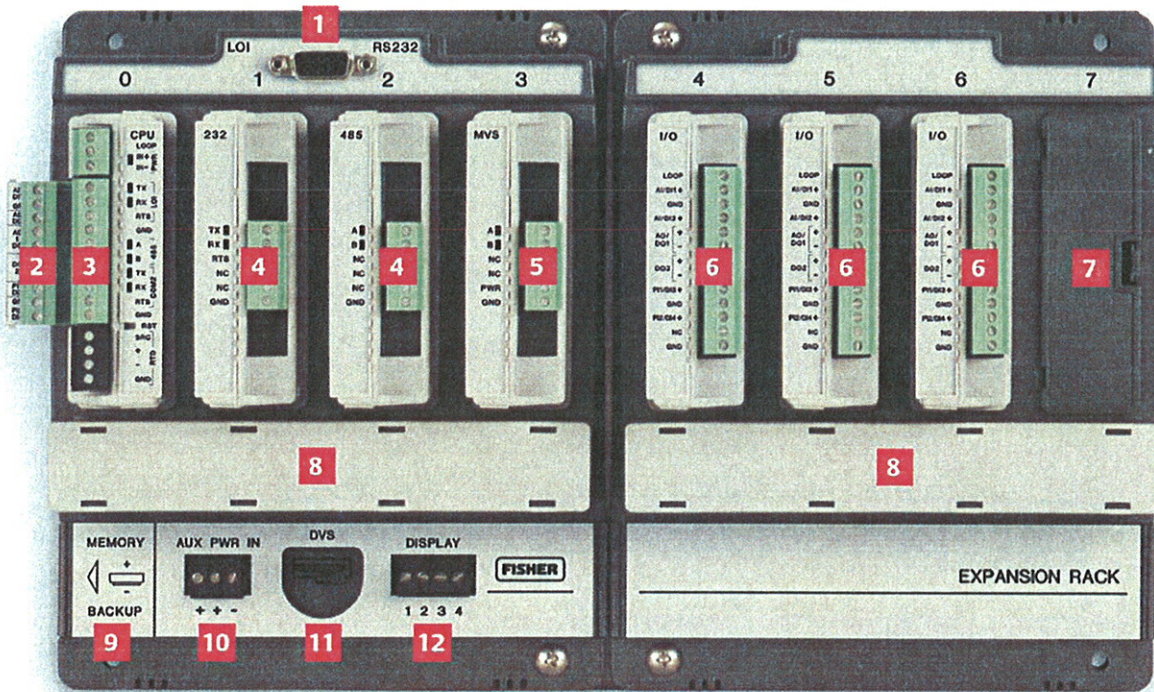
Remote Automation Solutions

Phone (641) 754-3449 Toll Free (800) 807-0730 (US & Canada only)

FAX (641) 754-3630

Website: www.EmersonProcess.com/flow


EMERSON
Process Management



Base unit (left) provides the backplane, module slots, ports, and electrical interconnections for the FloBoss 107. Dimensions are 204 mm H by 153 mm W by 140 mm D (8 in. H by 6 in. W by 5.5 in. D). Expansion rack (right) plugs into base unit and provides backplane and slots for additional modules. (Same dimensions as base unit).

1 Local operator interface port (RS-232) communicates to a laptop or similar PC device for local configuration and data retrieval.

2 I/O card is available for the CPU module. Five of the six I/O points are configurable by type (AI/DI, AI/DI, AO/DO, DI/PI, DI/PI) and the sixth is a DO.

3 CPU module contains the main processing unit, memory, operational firmware, RS-232 port, RS-485 port, and RTD input.

4 Communication modules are available for a second RS-232 port or RS-485 port.

5 MVS module supports up to six multi-variable sensor units for differential pressure flow measurement. One MVS module can be used in either slot 4 of the base unit or expansion rack.

6 I/O modules provide six I/O points (same as I/O card). Up to six I/O modules can be plugged into the FloBoss 107. 24 Vdc loop power is provided.

7 Module slots accommodate I/O and communication modules and are protected by removable covers when not used.

8 Covered wiring tray neatly routes field wiring to and from modules.

9 Battery compartment uses lithium battery to backup RAM in the CPU.

10 Input power range for the FloBoss 107 and I/O is 8 to 30 Vdc.

11 DVS port provides a serial data link to a dual-variable sensor (DVS) unit.

12 Display port connects a keypad / display unit to the FloBoss 107. Supports ROC and Modbus slave protocols.

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This publication is presented for informational purposes only, and while every effort has been made to ensure its accuracy, its content is not to be construed as a warranty or guarantee, expressed or implied, regarding the products described herein or their use or applicability.

ISO 9001:2000



Certificate No. 004372
Certificate No. 005912

D351406X012 / Printed in USA / 5M / 12-06

RECEIVED November 02, 2009

MVS205 Multi-Variable Sensor

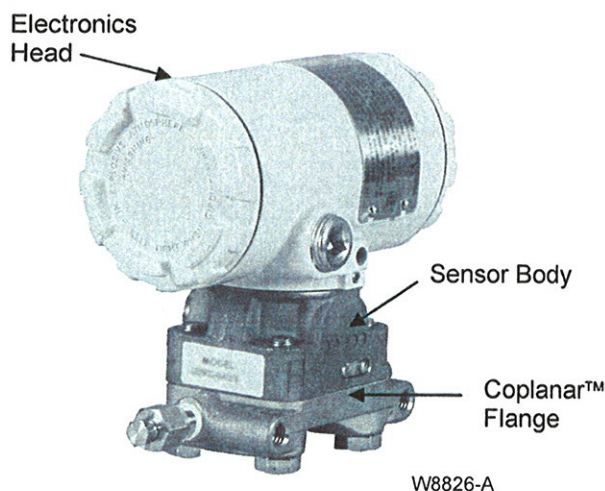
The MVS205 Multi-Variable Sensor (version 1.12 or greater) provides static pressure, differential pressure, and process temperature inputs directly to a ROC 300/800 Series Remote Operations Controller or FloBoss™ 407/500 Series Flow Manager. The inputs from an MVS sensor are used in performing differential pressure type calculations. The MVS205 typically operates as a remote unit that communicates via a serial format.

FloBoss 407 units may use a remote or integral MVS205 sensor. ROC300-Series controllers must be equipped with a Remote MVS Interface (CMA8H). FloBoss 500-Series units must be equipped with a Remote MVS Interface (CR1).

Variables

Functionally, the MVS is a sensor device that measures three flow-related variables simultaneously: differential pressure, static pressure, and temperature. These variables are continuously available to the FloBoss or ROC unit that polls the MVS.

An external three or four-wire RTD is used to sense the process temperature. **The RTD sensor is connected directly to the interface circuit board** in the MVS sensor housing. User-supplied RTD field wiring is required for the connection.



MVS205 Multi-Variable Sensor

Transducer and Interface Circuit

The MVS consists of a transducer and an interface circuit. The transducer, contained in the sensor body, uses capacitance-cell technology to sense differential pressure and piezoresistive technology to sense the static (absolute or gauge) pressure.

The transducer electronics convert the pressure variables directly into a digital format, allowing accurate correction and compensation. The raw temperature is converted by the interface board into digital format. A microprocessor linearizes and corrects the raw pressure signals (from the sensor) using characterization data stored in non-volatile memory.

The interface circuit allows the MVS to connect to and communicate with a ROC or FloBoss using a serial EIA-485 (RS-485) connection. In a Remote MVS, this interface circuit board is enclosed in an explosion-proof electronics head.

Accuracy

Two versions of the MVS sensor are available: MVS205P with reference accuracy of 0.075% and MVS205E with reference accuracy of 0.10%.

Mounting

Attached to the bottom of the sensor body is a Coplanar™ flange. This flange, which provides drain/vent valves, allows the MVS to be mounted on a pipestand, on a wall or panel, or on an integral orifice assembly or manifold valve.

Approvals

A list of North American approvals can be found in the Specifications table on page 2. For information on the European ATEX approved version, please refer to Specification Sheet 2.5:MVSCE.

Flow Computer Division

Website: www.EmersonProcess.com/flow


EMERSON
Process Management

RECEIVED November 02, 2009

D301079X012

Specifications

DIFFERENTIAL PRESSURE INPUT

Range: 0 to 6.22 kPa (0 to 25" H₂O),
0 to 62.2 kPa (0 to 250" H₂O), or
0 to 248.8 kPa (0 to 1000" H₂O).

Reference Accuracy:

±0.075% of URL (upper range limit) (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 10:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: 250 bar (3626 psi) Applied on either or both sides without damage to the sensor.

STATIC PRESSURE INPUT

Range: Either Absolute or Gauge:

0 to 5516 kPa (0 to 800 psia/psig)

0 to 25,000 kPa (0 to 3626 psia/psig)

Reference Accuracy:

±0.075% of URL (for MVS205P)

±0.10% of URL (for MVS205E).

Includes linearity, hysteresis, and repeatability effects for spans up to 6:1 turndown.

Stability: ±0.1% of URL for 12 months.

Over Pressure Limit: Same as URL.

PROCESS TEMPERATURE INPUT (MVS205 REMOTE ONLY)

Type: For 3 or 4-wire platinum 100-ohm RTD (conforming to IEC 751 Class B), with $\alpha = 0.00385$.

Range: -40 to 400°C (-40 to 752°F).

Reference Accuracy: ±0.28°C (±0.5°F), exclusive of RTD sensor error. Specification includes linearity, hysteresis, and repeatability effects.

Excitation Current: 1.24 mA.

OUTPUT (MVS205 REMOTE ONLY)

EIA-485 (RS-485) asynchronous serial communication using Modbus protocol for up to 605 m (2000 ft) distance.

POWER

Input at 0 to 75°C: 8 to 30 V dc, 245 mW average.

Input at -40 to 0°C: 8.5 to 30 V dc, 245 mW average.

Supplied by ROC, FloBoss, or Remote MVS Interface.

WEIGHT

Including head, 3.0 kg (6.7 lb).

ENVIRONMENTAL

Operating Temperature: -40 to 75°C (-40 to 167°F).

Storage Temperature: -50 to 100°C (-58 to 230°F).

Operating Humidity: 0 to 99%, non-condensing.

DIMENSIONS

147 mm H by 163 mm W by 84 mm D (5.8 in. H by 6.4 in. W by 3.3 in. D).

VIBRATION EFFECT

Sensor outputs shall not shift more than +0.1% of upper range limit per g from 5 to 2000 Hz in any axis when tested per IEC 770, Section 6.2.14.

CONSTRUCTION

Sensor Body and Coplanar Flange: 316 SST.

Wetted Parts: 316 SST is standard; Hastelloy C (NACE compliant) is available. Wetted O-rings are glass-filled TFE.

Electronics Head (MVS205 Remote): Urethane-painted die-cast aluminum alloy, rated Type 4X.

MOUNTING (MVS205 REMOTE ONLY)

Pipestand: Mounts on 50 mm (2 in.) pipe with U-bolt and optional flange bracket.

Wall/panel: Mounts with optional flange bracket, bolted on 71 mm (2.8 in.) centers.

CONNECTIONS

Conduit: Head has two 1/2-inch NPT connections.

Process: 1/4-18 NPT on 2-1/8 inch centers.

APPROVALS (MVS205 REMOTE ONLY)

Evaluated per the Following Standards:

CSA C22.2 No. 30.

CSA C22.2 No. 213.

UL 1203, UL 1604.

Certified by CSA as: MVS205R Models RSE or RSP Series.

Product Markings for Hazardous Locations:

Class I, Division 1, Groups C and D.

Class I, Division 2, Groups A, B, C, and D, T5

($T_{amb}=70^{\circ}\text{C}$), T4 ($T_{amb}=75^{\circ}\text{C}$).

Approved by Industry Canada for use with approved flow computers. Approved as MVS205R Series Remote Sensors (Measurement Canada approval # AG-0412).

Approved by the Alberta Boilers Safety

Association: Approval # 0F0792.2

FloBoss is a mark of one of the Emerson Process Management companies. The Emerson logo is a trademark and service mark of Emerson Electric Co. All other marks are the property of their respective owners. The contents of this publication are presented for informational purposes only. While every effort has been made to ensure informational accuracy, they are not to be construed as warranties or guarantees, express or implied, regarding the products or services described herein or their use or applicability. Fisher Controls reserves the right to modify or improve the designs or specifications of such products at any time without notice.

Emerson Process Management

Flow Computer Division

Marshalltown, IA 50158 U.S.A.

Houston, TX 77041 U.S.A.

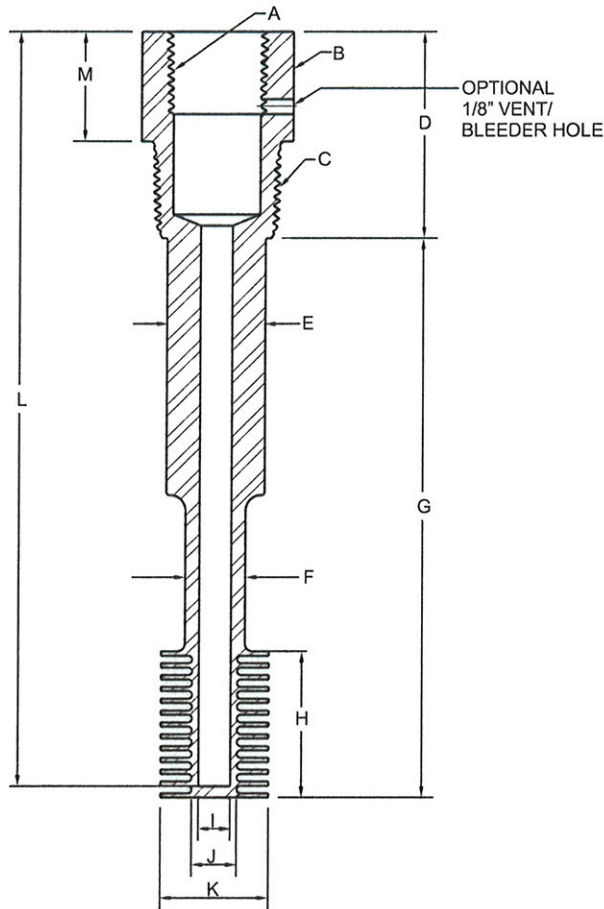
Pickering, North Yorkshire UK Y018 7JA

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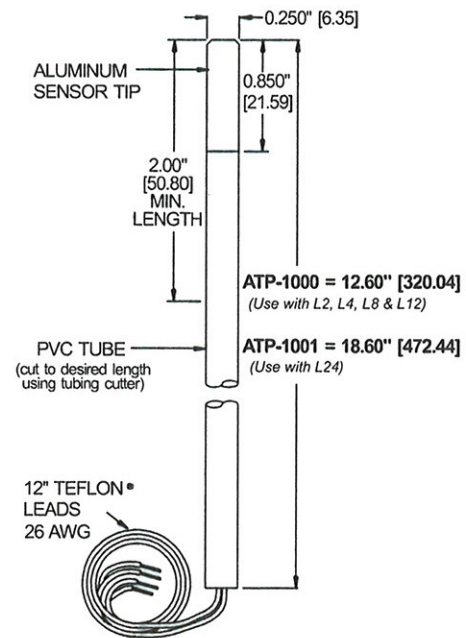


Thermosync Specifications

THERMOSYNC MODEL NO. DIMENSIONS



PROBE



ATP-1000 & ATP-1001 Probe Specifications:

Type: 4-Wire Platinum Wire-Wound
RTD Element
Resistance: 100 Ohms at 0°C (IEC 751)
Alpha Coefficient: .00385
Accuracy: ±0.05°C
Temp. Range: -40°C to +60°C
-40°F to +140°F

Calibration/Accuracy Certification Service Available.

	PROCESS CONN.												
Part Number	A	B	C	D	E	F	G	H	I	J	K	L	M
TAN-12C0-L2	1/2" NPT	1.25"	1/2" NPT	1.69"	0.633	.495"	2.22"	1.20"	260"	37"	.645"	3.88"	90"
TAN-12C0-L4	1/2" NPT	1.25"	1/2" NPT	1.69"	0.633	.495"	2.96"	1.20"	260"	37"	.645"	4.75"	90"
TAN-12C0-L8	1/2" NPT	1.25"	1/2" NPT	1.69"	0.633	.495"	4.59"	1.20"	260"	37"	.645"	6.37"	90"
TAN-12C0-L12	1/2" NPT	1.25"	1/2" NPT	1.69"	0.633	N/A	6.66"	1.20"	260"	37"	.645"	8.45"	90"
TAN-12C0-L24	1/2" NPT	1.25"	1/2" NPT	1.69"	0.633	N/A	9.89"	1.20"	260"	37"	.645"	11.67"	90"
TAN-34C0-L2	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	2.22"	1.20"	260"	37"	.85"	3.82"	90"
TAN-34C0-L4	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	2.96"	1.20"	260"	37"	.85"	4.56"	90"
TAN-34C0-L8	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	.495"	4.59"	1.20"	260"	37"	.85"	6.20"	90"
TAN-34C0-L12	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	N/A	6.66"	1.20"	260"	37"	.85"	8.26"	90"
TAN-34C0-L24	1/2" NPT	1.25"	3/4" NPT	1.69"	0.808	N/A	9.89"	1.20"	260"	37"	.85"	11.48"	90"
TAN-10C0-L4	1/2" NPT	1.375"	1" NPT	1.69"	0.808	.495"	2.96"	1.20"	260"	37"	.85"	4.75"	90"
TAN-10C0-L8	1/2" NPT	1.375"	1" NPT	1.69"	0.808	.495"	4.59"	1.20"	260"	37"	.85"	6.37"	90"
TAN-10C0-L12	1/2" NPT	1.375"	1" NPT	1.69"	0.808	N/A	6.66"	1.20"	260"	37"	.85"	8.45"	90"
TAN-10C0-L24	1/2" NPT	1.375"	1" NPT	1.69"	0.808	N/A	9.89"	1.20"	260"	37"	.85"	11.67"	90"

All Thermowells:

Material: 316L SS
Press/Temp: 4900 PSI Max @ 330° F
Flow: 100 FPS (L2, L4, L8, L12) or 50 FPS (L24) max in 1000 PSI Natural Gas
Optional Vent/Bleeder Hole Available
Additional Plug & Chain Assembly Available

NOTE: Use a thermal coupling paste or fluid to couple the probe to the well ONLY in the lower .5 inches of the well. DO NOT fill the well with thermal coupling fluid. Spring load the probe to contact the bottom of the well.

U.S. PATENTED - FOREIGN PATENTS PENDING

TDOC-4 REV.11 1-21-03

RECEIVED November 02, 2009

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300070000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
COUNTY: DAGGETT		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/17/2012	<input type="checkbox"/> ALTER CASING
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CASING REPAIR
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS
	<input type="checkbox"/> CHANGE WELL STATUS
	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS
	<input type="checkbox"/> DEEPEN
	<input type="checkbox"/> FRACTURE TREAT
	<input type="checkbox"/> OPERATOR CHANGE
	<input type="checkbox"/> PLUG AND ABANDON
	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME
	<input type="checkbox"/> RECLAMATION OF WELL SITE
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION
	<input type="checkbox"/> SIDETRACK TO REPAIR WELL
	<input type="checkbox"/> TUBING REPAIR
	<input type="checkbox"/> VENT OR FLARE
	<input type="checkbox"/> WATER SHUTOFF
	<input type="checkbox"/> SI TA STATUS EXTENSION
	<input type="checkbox"/> WILDCAT WELL DETERMINATION
	<input type="checkbox"/> OTHER

OTHER:

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well Resumed Production on October 17, 2012 at 12:00 PM,
 after being off for more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 October 23, 2012

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A	DATE 10/18/2012	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
1. TYPE OF WELL Gas Well		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
2. NAME OF OPERATOR: WEXPRO COMPANY		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902		9. API NUMBER: 43009300070000
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. FIELD and POOL or WILDCAT: CLAY BASIN
		COUNTY: DAGGETT
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> NOTICE OF INTENT Approximate date work will start: 3/15/2013	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE <input type="checkbox"/> PRODUCTION START OR RESUME <input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION
<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion:			
<input type="checkbox"/> SPUD REPORT Date of Spud:			
<input type="checkbox"/> DRILLING REPORT Report Date:		<input checked="" type="checkbox"/> OTHER	OTHER: <input type="text" value="Production Equipment"/>

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

Wexpro Company, requests approval to upgrade the existing production equipment on the above mentioned well location. The dehy will be removed and replaced with a ProPack. Also, a new meter run and meter building will be installed. All new equipment will be installed on existing disturbance and there will be no new additional surface disturbance. The new equipment will be painted the approved BLM color to match the existing production equipment on location. Upon completion of the new production equipment installation an updated Site Facility Diagram will be submitted to the Vernal BLM Field Office.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 February 20, 2013

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A		DATE 2/20/2013

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300070000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
COUNTY: DAGGETT		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE	<input type="checkbox"/> ALTER CASING	<input type="checkbox"/> CASING REPAIR	
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/23/2013	<input type="checkbox"/> CHANGE TO PREVIOUS PLANS	<input type="checkbox"/> CHANGE TUBING	<input type="checkbox"/> CHANGE WELL NAME	
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> CHANGE WELL STATUS	<input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS	<input type="checkbox"/> CONVERT WELL TYPE	
<input type="checkbox"/> DRILLING REPORT Report Date:	<input type="checkbox"/> DEEPEN	<input type="checkbox"/> FRACTURE TREAT	<input type="checkbox"/> NEW CONSTRUCTION	
	<input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> PLUG AND ABANDON	<input type="checkbox"/> PLUG BACK	
	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> RECLAMATION OF WELL SITE	<input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION	
	<input type="checkbox"/> REPERFORATE CURRENT FORMATION	<input type="checkbox"/> SIDETRACK TO REPAIR WELL	<input type="checkbox"/> TEMPORARY ABANDON	
	<input type="checkbox"/> TUBING REPAIR	<input type="checkbox"/> VENT OR FLARE	<input type="checkbox"/> WATER DISPOSAL	
	<input type="checkbox"/> WATER SHUTOFF	<input type="checkbox"/> SI TA STATUS EXTENSION	<input type="checkbox"/> APD EXTENSION	
	<input type="checkbox"/> WILDCAT WELL DETERMINATION	<input type="checkbox"/> OTHER	OTHER: <input style="width: 100px;" type="text"/>	

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 The above well Resumed Production on December 23, 2013, after being off for more than 90 days.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 December 30, 2013

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A	DATE 12/26/2013	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
1. TYPE OF WELL Gas Well		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
2. NAME OF OPERATOR: WEXPRO COMPANY		9. API NUMBER: 43009300070000
3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902		9. FIELD and POOL or WILDCAT: CLAY BASIN
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		COUNTY: DAGGETT
		STATE: UTAH

11.

CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	<input type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 12/23/2013
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	<input type="checkbox"/> OTHER: <input style="width: 100px;" type="text"/>	
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well Resumed Production on December 23, 2013, after being off for more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 January 14, 2014

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A		DATE 12/26/2013

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
3. ADDRESS OF OPERATOR: P.O. Box 458, Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300070000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
COUNTY: DAGGETT		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	<input type="checkbox"/> WILDCAT WELL DETERMINATION
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/25/2014	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME	OTHER: <input style="width: 100px;" type="text"/>		
<input type="checkbox"/> SPUD REPORT Date of Spud:	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF			
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.

The above well resumed production on October 25, 2014; after being off more than 90 days.

Accepted by the
Utah Division of
Oil, Gas and Mining
FOR RECORD ONLY
 October 31, 2014

NAME (PLEASE PRINT) Paul Jibson	PHONE NUMBER 307 352-7561	TITLE Permit Agent
SIGNATURE N/A	DATE 10/28/2014	

STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS, AND MINING		FORM 9
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill new wells, significantly deepen existing wells below current bottom-hole depth, reenter plugged wells, or to drill horizontal laterals. Use APPLICATION FOR PERMIT TO DRILL form for such proposals.		5. LEASE DESIGNATION AND SERIAL NUMBER: SL-045051A
1. TYPE OF WELL Gas Well		6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
2. NAME OF OPERATOR: WEXPRO COMPANY		7. UNIT or CA AGREEMENT NAME: CLAY BASIN
3. ADDRESS OF OPERATOR: P.O. Box 458 , Rock Springs, WY, 82902		8. WELL NAME and NUMBER: CLAY BASIN UNIT 20
4. LOCATION OF WELL FOOTAGES AT SURFACE: 0210 FNL 0900 FWL QTR/QTR, SECTION, TOWNSHIP, RANGE, MERIDIAN: Qtr/Qtr: NWNW Section: 22 Township: 03.0N Range: 24.0E Meridian: S		9. API NUMBER: 43009300070000
PHONE NUMBER: 307 922-5612 Ext		9. FIELD and POOL or WILDCAT: CLAY BASIN
COUNTY: DAGGETT		STATE: UTAH

11. CHECK APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> NOTICE OF INTENT Approximate date work will start:	<input type="checkbox"/> ACIDIZE <input type="checkbox"/> CHANGE TO PREVIOUS PLANS <input type="checkbox"/> CHANGE WELL STATUS <input type="checkbox"/> DEEPEN <input type="checkbox"/> OPERATOR CHANGE	<input type="checkbox"/> ALTER CASING <input type="checkbox"/> CHANGE TUBING <input type="checkbox"/> COMMINGLE PRODUCING FORMATIONS <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> RECLAMATION OF WELL SITE <input type="checkbox"/> SIDETRACK TO REPAIR WELL <input type="checkbox"/> VENT OR FLARE <input type="checkbox"/> SI TA STATUS EXTENSION <input type="checkbox"/> OTHER	<input type="checkbox"/> CASING REPAIR <input type="checkbox"/> CHANGE WELL NAME <input type="checkbox"/> CONVERT WELL TYPE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> PLUG BACK <input type="checkbox"/> RECOMPLETE DIFFERENT FORMATION <input type="checkbox"/> TEMPORARY ABANDON <input type="checkbox"/> WATER DISPOSAL <input type="checkbox"/> APD EXTENSION	OTHER: <input style="width: 100px;" type="text"/>
<input checked="" type="checkbox"/> SUBSEQUENT REPORT Date of Work Completion: 10/30/2015	<input type="checkbox"/> REPERFORATE CURRENT FORMATION <input type="checkbox"/> TUBING REPAIR <input type="checkbox"/> WATER SHUTOFF <input type="checkbox"/> WILDCAT WELL DETERMINATION	<input checked="" type="checkbox"/> PRODUCTION START OR RESUME		
<input type="checkbox"/> SPUD REPORT Date of Spud:				
<input type="checkbox"/> DRILLING REPORT Report Date:				

12. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Clearly show all pertinent details including dates, depths, volumes, etc.
 This well resumed production on October 30, 2015 after being off more than 90 days.

Accepted by the
 Utah Division of
 Oil, Gas and Mining
FOR RECORD ONLY
 November 06, 2015

NAME (PLEASE PRINT) Tammy Fredrickson	PHONE NUMBER 307 352-7514	TITLE Senior Permit Agent
SIGNATURE N/A	DATE 11/5/2015	